

ORDERS FOR TUESDAY, MAY 9,
2017

Mr. McCONNELL. Mr. President, I ask unanimous consent that when the Senate completes its business today, it adjourn until 10 a.m., Tuesday, May 9; further, that following the prayer and pledge, the morning hour be deemed expired, the Journal of proceedings be approved to date, the time for the two leaders be reserved for their use later in the day, and morning business be closed; further, that following leader remarks, the Senate proceed to executive session to resume consideration of the Gottlieb nomination, with the time until 12:30 p.m. equally divided in the usual form; further, that the Senate recess from 12:30 p.m. until 2:15 p.m. to allow for the weekly conference meetings; finally, that all time during recess, adjournment, morning business, and leader remarks count postcloture on the Gottlieb nomination.

The PRESIDING OFFICER. Without objection, it is so ordered.

ORDER FOR ADJOURNMENT

Mr. McCONNELL. Mr. President, if there is no further business to come before the Senate, I ask unanimous consent that it stand adjourned under the previous order, following the remarks of Senators Thune and Sullivan.

The PRESIDING OFFICER. Without objection, it is so ordered.

The Senator from South Dakota.

HEALTHCARE LEGISLATION

Mr. THUNE. Mr. President, it has been said that nothing is certain but death and taxes. To that, nowadays, we might add bad news about ObamaCare because if there is one thing we can count on, it is bad news about this fatally flawed law—high premium costs, huge deductibles, customers losing health plans, customers losing doctors, fewer choices, failed co-ops, unraveling exchanges, and I could go on.

There is no question that our healthcare system had problems before ObamaCare was passed. Clearly reforms were needed. But as the past 7 years have made clear, ObamaCare was not the answer, and this law is rapidly collapsing under its own weight.

Here is a sampling of recent ObamaCare headlines.

This is from Bloomberg: “Thousands of ObamaCare Customers Left Without Options as Insurers Bolt.”

This is from CNBC: “Aetna will exit ObamaCare markets in Virginia in 2018, citing expected losses on individual plans this year.”

From the Arizona Republic: “Consumers seek relief as ‘ObamaCare’ rates rise.”

From USA TODAY: “Iowa may be without individual health plans if insurer pulls out.”

In February of this year, Mark Bertolini, the CEO of health insurance company Aetna, asserted that

ObamaCare is in a death spiral. There is good reason to think he is right in that significant losses are driving health insurers out of the exchanges. Last year, Aetna announced that it would withdraw from 11 of the 15 States in which it offered exchange plans, Humana said it would exit several exchanges, and mega-insurer UnitedHealthcare announced that it was pulling out of most of the 34 States in which it offered exchange plans.

Roughly one-third of U.S. counties have just one choice of health insurer on their exchanges for 2017, and the situation looks likely to get much worse next year. In February, health insurer Humana announced its decision to completely withdraw from the ObamaCare exchanges for 2018. Aetna is pulling out of two of the four States in which it will still offer plans in 2018, and it has indicated it may pull back even further. Wellmark is leaving Iowa. UnitedHealthcare is leaving Virginia. Other insurers are contemplating similar exits.

The New York Times reported in March that “ObamaCare Choices Could Go from One to Zero in Some Areas.”

“Parts of the country,” the Times notes, “are in jeopardy of not having an insurer offering ObamaCare plans next year.” The quote goes on: “Many counties already have just one insurer offering health plans in the ObamaCare marketplaces, and some of those solo insurers are showing signs that they are eyeing the exits.” That is from the New York Times.

What that means is that tens of thousands of Americans may have ObamaCare subsidies next year without insurance plans to spend them on. As my colleague Senator ALEXANDER, who does so much good work on healthcare as the chairman of the HELP Committee, has said, it is like having a bus ticket in a town with no buses running.

While Americans’ health insurance options dwindle, their premiums are rising. Midlevel ObamaCare plans saw an average 25 percent premium increase for 2017—a 25-percent increase for just 1 year, which is on top of years of premium increases under ObamaCare. And what are Americans with those plans paying for? The odds are good that they are paying for plans with limited choices of doctors and hospitals. A 2016 study of 18 States and Washington, DC, found that 75 percent of their exchange plans for 2017 would likely be health maintenance organizations or exclusive provider organizations—two types of plans that tend to offer narrow provider networks.

In his joint address to Congress at the end of February, the President said of ObamaCare: “Action is not a choice—it is a necessity.” He is exactly right. ObamaCare is collapsing, and the status quo is not sustainable. Unless we want millions of Americans to face healthcare disaster, we have to repeal and replace this law.

Last week, the House passed an ObamaCare repeal and replacement

bill. This legislation repeals ObamaCare’s tax increases, penalties, and mandates and starts the process of restoring control of healthcare to States and individuals.

The House has made a good start, and I am looking forward to getting to build on their bill here in the Senate. I want to make sure we amend the House tax credit to ensure that assistance is better targeted to those who need it the most. I am looking forward to working with my colleagues—Chairman ALEXANDER, Chairman HATCH on the Finance Committee, Policy Committee Chairman BARRASSO, and many others—to make sure we have a bill that will provide the American people with real relief.

ObamaCare was founded on the premise that government knows best when it comes to individuals’ healthcare and that a one-size-fits-all solution is somehow the best solution, but we know now that is not the case. Individuals know best, and their doctors know best. Government does not know best. It is absurd to think that a massive Federal bureaucracy can hand down one comprehensive solution that will somehow meet the needs of hundreds of millions of individuals in this country. We need to move control from Washington and give it back to the States so they can embrace healthcare innovations and solutions that work for the individuals and the particular needs in their States.

Republicans are working to implement the kind of healthcare reform the American people are looking for—more affordable, more personal, more flexible, and less bureaucratic. Americans have had enough of ObamaCare’s problems. They are ready for healthcare reform that actually works, and we are committed to giving it to them.

I yield the floor.

I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The senior assistant legislative clerk proceeded to call the roll.

Mr. SULLIVAN. Mr. President, I ask unanimous consent that the order for the quorum call be rescinded.

The PRESIDING OFFICER. Without objection, it is so ordered.

MINISTERIAL OF THE ARCTIC COUNCIL

Mr. SULLIVAN. Mr. President, I come to the floor to speak on a couple of important foreign policy issues.

I begin by talking about what is going to be happening in Alaska in just a few days. Really, the eyes of the world are going to be on Fairbanks, AK—the Golden Heart City in the middle of Alaska’s interior—for a major foreign policy event. The United States will be hosting the Ministerial of the Arctic Council and will be passing the chairmanship of that Council over to Finland.

The Arctic Council is an important foreign policy body. It consists of the